ADD'L FEE

OR

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 1) NUMBER FILED NUMBER EXTRA FOR RATE FEE RATE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS minus 20 = = OR (37 CFR 1.16(c)) INDEPENDENT CLAIMS minus 3 = OR (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR TOTAL TOTAL OR \* If the difference in column 1 is less than zero, enter "0" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY (Column 1) CLAIMS HIGHEST જ PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**AFTER PREVIOUSLY EXTRA** TIONAL TIONAL ENDMENT AMENDMENT PAID FOR FEE FEE Minus Total (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b)) Minus = OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST മ **PRESENT** RATE ADDI-REMAINING NUMBER RATE ADDI-**EXTRA** TIONAL TIONAL **PREVIOUSLY** ENT **AFTER** PAID FOR FEE FEE AMENDMENT Total (37 CFR 1.16(c)) Minus ENDMI x s OR Independent (37 CFR 1.16(b)) Minus = X S = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 3) (Column 1) (Column 2) CLAIMS HIGHEST PRESENT O RATE NUMBER RATE ADDI-ADDI-REMAINING TIONAL FEE TIONAL FEE PREVIOUSLY **FXTRA** ENDMENT **AFTER** AMENDMENT PAID FOR Total (37 CFR 1.16(c)) Minus = X S OR X 5 Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent

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<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

|  |  |           |                                   |         |     |  |                  |        |         | ľ              | Application            | OI LA             | JCKEL NUII          | iDei                   |    |
|--|--|-----------|-----------------------------------|---------|-----|--|------------------|--------|---------|----------------|------------------------|-------------------|---------------------|------------------------|----|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective November 10, 1998  470284 09/47020  |  |           |                                   |         |     |  |                  |        |         |                |                        |                   |                     | 028                    |    |
|  |  |           | S FILED -<br>Column 1)            |         |     | ALL<br>PE                                  | ENTITY           | OR     | OTHER   |                |                        |                   |                     |                        |    |
| FOR NUMBER FILED NUMBER EXTRA  |  |           |                                   |         |     |  | RA               | ΤE     | FEE     | 1              | RATE                   | FEE               |                     |                        |    |
| ВА   | SIC FEE  |           |                                   |         |     |  |                  |        |         |                | 380.00                 | OR                |                     | 760.00                 | l  |
| TOTAL CLAIMS   |  |           | 3                                 | minus   | 20= | •  |                  |        | X\$     | 9=             |                        | OR                | X\$18=              | 195∞                   |    |
| INDEPENDENT CLAIMS   |  |           | ω)                                | i minus | 3 = | • 2  | _                |        | хз      | 9=             |                        | OR                | X78=                | 15E "                  | l  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |           |                                   |         |     |  |                  | +13    | 0=      |                | OR                     | +260 <del>=</del> |                     |                        |    |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |           |                                   |         |     |  |                  |        | TO      | AL             |                        | OR                | TOTAL               | 1140                   | İ  |
|  | CI   | S AS A    | MENDE                             |         |     |  |                  |        | OTHER   | THAN           |                        |                   |                     |                        |    |
|  |  |           | umn 1)                            | ,       |     | Column 2)<br>Highest                       | (Column 3)       |        | SM      | <b>XLL</b>     | ENTITY                 | OR                | SMALL               |                        | 1  |
| AMENDMENT A  | A  | REM<br>Al | AIMS<br>LAINING<br>FTER<br>NOMENT |         | Pf  | HIGHEST<br>NUMBÉR<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |        | RA      | ΓE             | ADDI-<br>TIONAL<br>FEE |                   | RATE                | ADDI-<br>TIONAL<br>FEE |    |
|  | Total  | • (       | 0                                 | Minus   | -   | 31   | -29              |        | X\$     | 9=             |                        | OR                | X\$18=              | 5200                   | Þ  |
|  | Independent                                    | •         | 11                                | euniM   | *** | · <u>5</u>                                 | = le             |        | X3:     | <del>-</del>   |                        | OR                | X78=                | 504.00                 |    |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |           |                                   |         |     |  |                  |        | +13     | 0=             |                        | OR                | +260=               |                        |    |
|  |  |           |                                   |         |     |  |                  |        |         | )TAL<br>FEE    |                        | OR                | TOTAL<br>ADDIT, FEE | 096 0                  | 0  |
|  |  | (Col      | umn 1)                            |         | (0  | Column 2)                                  | (Column 3)       |        | AUUII.  | ree            |                        | •                 | <b>705</b> 11.1 CD  |                        |    |
| AMENDMENT B  | 19/11/13                                       | REM<br>Al | AIMS<br>NAINING<br>FTER<br>NDMENT |         | PI  | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |        | RA      | E,             | ADDI-<br>TIONAL<br>FEE |                   | RATE                | ADDI-<br>TIONAL<br>FEE |    |
|  | Total  | . (       | 60                                | Minus   | **  | 60   |                  |        | X\$     | 9=             |                        | OR                | X\$18=              |                        |    |
|  | Independent                                    | •         | 11                                | Minus   | 440 | - //                                       | -                |        | X39     | )=             |                        | OR                | X78=                |                        | /3 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |           |                                   |         |     |  |                  |        | +13     | 0=             |                        | 96                | +260=               |                        | #  |
|  |  |           |                                   |         |     |  |                  |        | TOOL    | )TAL<br>FEE    |                        | OR                | TOTAL<br>ADDIT. FEE | Ì                      |    |
| , (Column 1) (Catumn 2) (Catumn 3)   |  |           |                                   |         |     |  |                  |        |         |                |                        |                   |                     |                        |    |
| AMENDMENT C  | 1/27/04  | REM       | AIMS<br>IAINING<br>FTER<br>IDMENT |         | Pf  | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |        | RAT     | E,             | ADDI-<br>TIONAL<br>FEE |                   | RATE                | ADDI-<br>TIONAL<br>FEE |    |
|  | Total  | ي)، •     | <u>a()</u>                        | Minus   | -   | 60   | - /              |        | X\$ 9   | <b>}</b> =     |                        | OR                | X\$18=              |                        |    |
|  | Independent                                    | •         | 11                                | Minus   |     | · //                                       | -/               |        | X39     | ) <del>=</del> |                        | OR                | X78=                |                        |    |
| ٠  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |           |                                   |         |     |  |                  |        | +130    | <u> </u>       |                        | 00                | +260=               | 1/                     |    |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "riighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  OR +250=  TOTAL ADDIT. FEE  ADDIT. FEE |  |           |                                   |         |     |  |                  |        |         |                |                        |                   | D                   |                        |    |
|  | if the "Highest Num<br>The "Highest Num        |           |                                   |         |     |  |                  | er fou | nd in t | не еф          | propriate box          | tn cot            | umn 1.              |                        |    |